

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047

1997

This Form is
Open to Public
Inspection

Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 1997 calendar year, OR tax year period beginning , 1997, and ending , 19	
B Check if:	C
<input type="checkbox"/> Change of address	Family Care Foundation 10612 South Morada Drive Orange, CA 92869
<input checked="" type="checkbox"/> Initial return	
<input type="checkbox"/> Final return	
<input type="checkbox"/> Amended return (required also for State reporting)	
Please use IRS label or print or type. See Specific Instructions.	D Employer identification number 33-0734917
	E State registration number 1905569
	F Check <input type="checkbox"/> If exemption application is pending

G Type of organization ☒ Exempt under section 501(c) (3) ☐ (Insert number) OR ☐ section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

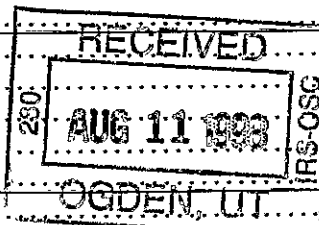
H(a) Is this a group return filed for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	I If either box in H is checked "Yes," enter four-digit group exemption number (GEN) <input type="checkbox"/>
(b) If "Yes," enter the number of affiliates for which this return is filed: <input type="checkbox"/>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
(c) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Other (specify) <input type="checkbox"/>

K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 11.)

1 Contributions, gifts, grants, and similar amounts received:			
a Direct public support	1a	357,013	
b Indirect public support	1b		
c Government contributions (grants)	1c		
d Total (add lines 1a through 1c) (attach schedule of contributors) (cash \$ 314,475 noncash \$ 42,538) See Statement 1.	1d		357,013
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		
3 Membership dues and assessments	3		
4 Interest on savings and temporary cash investments	4		3,613
5 Dividends and interest from securities	5		
6a Gross rents	6a		
b Less: rental expenses	6b		
c Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7 Other investment income (describe)	7		
8a Gross amount from sale of assets other than inventory	8a		
b Less: cost or other basis and sales expenses	8b		
c Gain or (loss) (attach schedule)	8c		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		
9 Special events and activities (attach schedule) See Statement 2			
a Gross revenue (not including \$ of contributions reported on line 1a)	9a	350	
b Less: direct expenses other than fundraising expenses	9b	350	
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		
10a Gross sales of inventory, less returns and allowances	10a		
b Less: cost of goods sold	10b		
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11 Other revenue (from Part VII, line 103)	11		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		360,626
13 Program services (from line 44, column (B))	13		120,363
14 Management and general (from line 44, column (C))	14		29,016
15 Fundraising (from line 44, column (D))	15		29,083
16 Payments to affiliates (attach schedule)	16		
17 Total expenses (add lines 16 and 44, column (A))	17		178,462
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		182,164
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		
20 Other changes in net assets or fund balances (attach explanation)	20		
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		182,164



Part I

Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 15.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att. sch.).. See St. 3. (cash \$ 51,931 non cash \$ 22,297)	22	74,228	74,228	
23	Specific assistance to individuals (att. sch.) St. 4.	23	2,708	2,708	
24	Benefits paid to or for members (att. sch.)	24			
25	Compensation of officers, directors, etc.	25	15,000	3,351	6,699 4,950
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29	1,615	384	771 460
30	Professional fundraising fees.....	30	17,500		17,500
31	Accounting fees.....	31	45	45	
32	Legal fees	32	2,563	897	1,666
33	Supplies	33	1,584	1,584	
34	Telephone.....	34	3,534	1,176	2,358
35	Postage and shipping	35	2,158	1,268	390 500
36	Occupancy	36	7,136	2,376	4,760
37	Equipment rental and maintenance.....	37	225	225	
38	Printing and publications.....	38	14,414	10,989	2,955 470
39	Travel	39	9,981	1,626	3,257 5,098
40	Conferences, conventions, and meetings	40	346	241	105
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	1,234	1,234	
43	Other expenses (itemize): a See Stmt. 5	43a	24,191	21,360	2,831
	b	43b			
	c	43c			
	d	43d			
	e	43e			
44	Total functional expenses (add lines 22 thru 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15..	44	178,462	120,363	29,016 29,083

Reporting of Joint Costs. - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III

Statement of Program Service Accomplishments (See Specific Instructions on page 18.)

What is the organization's primary exempt purpose? ▶ See Statement 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; but optional for others.)

a	See Statement 7	
	(Grants and allocations \$ 74,228)	120,363
b		
	(Grants and allocations \$)	
c		
	(Grants and allocations \$)	
d		
	(Grants and allocations \$)	
e	Other program services (attach schedule)	(Grants and allocations \$)
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	120,363

Part IV Balance Sheets (See Specific Instructions on page 18.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
ASSETS	45 Cash – non-interest-bearing		45 14,074
	46 Savings and temporary cash investments		46 159,429
	47 a Accounts receivable	47a	
	b Less: allowance for doubtful accounts	47b	47c
	48 a Pledges receivable	48a	
	b Less: allowance for doubtful accounts	48b	48c
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees (attach sch)		50
	51 a Other notes and loans receivable (attach schedule)	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53 1,238
	54 Investments – securities (attach schedule)		54
	55 a Investments – land, buildings, and equipment: basis	55a	
	b Less: accumulated depreciation (attach schedule)	55b	55c
56 Investments – other (attach schedule)		56	
57 a Land, buildings, and equipment: basis	57a 7,386		
b Less: accumulated depreciation (attach schedule) Stmt. 8	57b 1,234	57c 6,152	
58 Other assets (describe ▶ See Statement 9)		58 2,000	
59 Total assets (add lines 45 through 58) (must equal line 74)	0	59 182,893	
LIABILITIES	60 Accounts payable and accrued expenses		60 729
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63
	64 a Tax-exempt bond liabilities (attach schedule)		64a
	b Mortgages and other notes payable (attach schedule)		64b
	65 Other liabilities (describe ▶)		65
66 Total liabilities (add lines 60 through 65)	0	66 729	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted		67 92,395
	68 Temporarily restricted		68 89,769
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	0	73 182,164
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)	0	74 182,893

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 20.)

a Total revenue, gains, and other support per audited financial statements	a 360,626
b Amounts included on line a but not on line 12, Form 990:	
(1) Net unrealized gains on investments	
(2) Donated services and use of facilities	
(3) Recoveries of prior year grants	
(4) Other (specify):	
Add amounts on lines (1) through (4)	b
c Line a minus line b	c 360,626
d Amounts included on line 12, Form 990 but not on line a:	
(1) Investment expenses not included on line 6b, Form 990	
(2) Other (specify):	
Add amounts on lines (1) and (2)	d
e Total revenue per line 12, Form 990 (line c plus line d)	e 360,626

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a Total expenses and losses per audited financial statements	a 178,462
b Amounts included on line a but not on line 17, Form 990:	
(1) Donated services and use of facilities	
(2) Prior year adjustments reported on line 20, Form 990	
(3) Losses reported on line 20, Form 990	
(4) Other (specify):	
Add amounts on lines (1) through (4)	b
c Line a minus line b	c 178,462
d Amounts included on line 17, Form 990 but not on line a:	
(1) Investment expenses not included on line 6b, Form 990	
(2) Other (specify):	
Add amounts on lines (1) and (2)	d
e Total expenses per line 17, Form 990 (line c plus line d)	e 178,462

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 20.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Grant Montgomery 29475 Rancho California Rd#308 Temecula, CA 92591	President 50	0	0	0
Christine Mlot 10612 S. Morada Drive Orange, CA 92869	Treasurer 2	0	0	0
Philip Sherwood 350 Fernbanks Road Rockcliffe Park, Tom Hack	Secretary 8	0	0	0
10612 S. Morada Drive Orange, CA 92869	Vice-President 2	0	0	0
Angela Smith 29495 Rancho California RD#270 Temecula, CA 223800739	Member of Boa 20	0	0	0
Lawrence Corley 29290 Via Norte Temecula, CA 92591	Executive Dir 50	15,000	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule - see Specific Instructions on page 20.

Part VI Other Information (See Specific Instructions on page 21.)

Yes No

76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization <u>N/A</u> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81.	81a	0	
b	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.)	82b	N/A	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4), (5), or (6) organizations. - a Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A	
c	Dues, assessments, and similar amounts from members	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) organizations. - Enter:			
a	Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A	
87	501(c)(12) organizations. - Enter: a Gross income from members or shareholders	87a	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX.	88		X
89a	501(c)(3) organizations. - Enter: Amount of tax imposed during the year under: section 4911 <u>0</u> ; section 4912 <u>0</u> ; section 4955 <u>0</u>			
b	501(c)(3) and 501(c)(4) organizations. - Did the organization engage in any section 4958 excess benefit transaction during the year? If "Yes," attach a statement explaining each transaction.	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			0
d	Enter: Amount of tax in 89c, above, reimbursed by the organization			0
90a	List the states with which a copy of this return is filed			
b	Number of employees employed in the pay period that includes March 12, 1997 (See instructions.)	90b		
91	The books are in care of <u>Lawrence Corley</u> Telephone no. <u>909-676-2682</u> Located at <u>29495 Rncho Ca Road #271, Temecula CA</u> ZIP + 4 <u>92591</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>92</u> <u>N/A</u>			

Enter gross amounts unless otherwise indicated.

Note: (Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

N/A

Name, address, and employer identification number of corporation or partnership

Percentage of ownership interest

Nature of
business activities

Total
income

End-of-year
assets

N/A

turn, including accompanying schedules and statements, and to the best of my
on of preparer (other than officer) is based on all information of which preparer

1 8/6/98

Lawrence
Ex. Director

SCHEDULE A
(Form 990)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

See separate instructions.

OMB No. 1545-0047

1997

Department of the Treasury
Internal Revenue Service

► **Must be completed by the above organizations and attached to their Form 990 (or 990-EZ).**

Name of the organization

Family Care Foundation

Employer identification number

33-0734917

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions on page 1. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ►		0		

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions on page 1. List each one (whether individuals or firms.) If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ►		0

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. ▶ \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Form 990, Part V	2d	X
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions.	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?	3	X
4 Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions on page 2.)		

Part IV Reason for Non-Private Foundation Status (See instructions on pages 2 through 4.)The organization is not a private foundation because it is: (Please check only **ONE** applicable box):

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions on page 4.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions on page 4.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 1996	(b) 1995	(c) 1994	(d) 1993	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	N/A				
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose ..					
18 Gross income from interest, dividends, amounts received from payments on securities (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a sch. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24					
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a government unit or publicly supported organization) whose total gifts for 1993 through 1996 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts					
c Total support for section 509(a)(1) test: Enter line 24, column (e)					
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: N/A (1996) _____ (1995) _____ (1994) _____ (1993) _____					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year: (1996) _____ (1995) _____ (1994) _____ (1993) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					
d Add: Line 27a total .. and line 27b total					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					\$
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1993 through 1996, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions on page 4.)					

Part V Private School Questionnaire (See instructions on page 4.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

29

Yes No

30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

30

31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?

If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)

31

32 Does the organization maintain the following:

a Records indicating the racial composition of the student body, faculty, and administrative staff?

32a

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

32b

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

32c

d Copies of all material used by the organization or on its behalf to solicit contributions?

32d

If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)

33 Does the organization discriminate by race in any way with respect to:

a Students' rights or privileges?

33a

b Admissions policies?

33b

c Employment of faculty or administrative staff?

33c

d Scholarships or other financial assistance?

33d

e Educational policies?

33e

f Use of facilities?

33f

g Athletic programs?

33g

h Other extracurricular activities?

33h

If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)

34a Does the organization receive any financial aid or assistance from a governmental agency?

34a

b Has the organization's right to such aid ever been revoked or suspended?

34b

If you answered "Yes" to either 34a or b, please explain using an attached statement.

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

35

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions on page 6.) **N/A**
(To be completed ONLY by an eligible organization that filed Form 5768)Check here ☐ **a** If the organization belongs to an affiliated group.Check here ☐ **b** If you checked "a" above and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount. Enter the amount from the following table -														
<table border="0"> <tr> <td>If the amount on line 40 is -</td> <td>The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000 ..</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000 ..</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000 ..</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 40 is -	The lobbying nontaxable amount is -	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000 ..	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000 ..	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000 ..	Over \$17,000,000	\$1,000,000	41	
If the amount on line 40 is -	The lobbying nontaxable amount is -														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000 ..														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000 ..														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000 ..														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44													

Caution: If there is an amount on either line 43 or line 44, file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 7.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1997	(b) 1996	(c) 1995	(d) 1994	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities **N/A**
(For reporting only by organizations that did not complete Part VI-A) (See instructions on page 7.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

a Transfers from the reporting organization to a noncharitable exempt organization of:

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

b Other transactions:

(i) Sales of assets to a noncharitable exempt organization.

(ii) Purchases of assets from a noncharitable exempt organization.

(III) Rental of facilities or equipment.....

(iv) Reimbursement arrangements.....

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

[illegible]

Form 4562

990

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

1997

Attachment
Sequence No. 67Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach this form to your return.

Name(s) shown on return

Identifying number

Family Care Foundation

33-0734917

Business or activity to which this form relates

Form 990

Part I Election To Expense Certain Tangible Property (Section 179) (Note: If you have any "listed property," complete Part V before you complete Part I.)

1	Maximum dollar limitation. If an enterprise zone business, see page 2 of the instructions.	1	\$18,000
2	Total cost of section 179 property placed in service. See page 2 of the instructions.	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions.	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter amount from line 27	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from 1996. See page 3 of the instructions	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 1998. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property (automobiles, certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property.

Part II MACRS Depreciation For Assets Placed in Service ONLY During Your 1997 Tax Year (Do Not Include Listed Property.)**Section A - General Asset Account Election**

- 14 If you are making the election under section 168(l)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See page 3 of the instructions. ☐

Section B - General Depreciation System (GDS) (See page 3 of the instructions.)

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
15a 3-year property						
b 5-year property		7,136	5	MQ	S/L	1,234
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C - Alternative Depreciation System (ADS): (See page 6 of the instructions.)

16a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part III Other Depreciation (Do Not Include Listed Property.) (See page 6 of the instructions.)

17	GDS and ADS deductions for assets placed in service in tax years beginning before 1997	17	
18	Property subject to section 168(f)(1) election	18	
19	ACRS and other depreciation	19	

Part IV Summary (See page 7 of the instructions.)

20	Listed property. Enter amount from line 26	20	
21	Total. Add deductions on line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter here and on the appropriate lines of your return. Partnerships & S corporations - see instructions.	21	1,234
22	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	22	

Client 1000

Family Care Foundation

33-0734917

07/29/98

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Statement 2
Form 990, Part I, Line 9
Net Income (Loss) from Special Events

Special Events:
A) Small Party
B)
C)
Other:

Special Events	A	B	C	Other	Total
Gross Receipts	\$ 350	0	0	0	350
Less: Contributions	0	0	0	0	0
Gross Revenue	350	0	0	0	350
Less: Direct Expenses	350	0	0	0	350
Net Income (Loss)	\$ 0	0	0	0	0

Statement 3
Form 990, Part II, Line 22
Grants and Allocations

Cash Grants and Allocations:

Donee's Name: Various-See Statement 10
Amount Given: \$ 51,931

Total Cash Grants and Allocations: \$ 51,931

Noncash Grants and Allocations:

Donee's Name: Various-See Statement 10
Date of Gift: Various
Book Value: 22,297
Fair Market Value: \$ 22,297

1997

Federal Statements

Page 4

Client 1000

Family Care Foundation

33-0734917

07/29/98

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Statement 3 (Continued)
Form 990, Part II, Line 22
Grants and Allocations

Noncash Grants and Allocations:

Total Noncash Grants and Allocations:

\$ 22,297

Total Grants and Allocations:

\$ 74,228

Statement 4
Form 990, Part II, Line 23
Specific Assistance to Individuals

Food, shelter and clothing	\$	2,708
Total	\$	2,708

Statement 5
Form 990, Part II, Line 43
Other Expenses

Other Expenses	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Advertising & Marketing	\$ 822	822		
Bank Charges	565	6	559	
Film Work	216	216		
Insurance	1,142	381	761	
Storage	168	168		
Tax & License	1,228	17	1,211	
Video License & Master fee	3,250	3,250		
Broadcast Agent	16,000	16,000		
Publication Consultant	500	500		
Maintenance	300		300	
Total	\$ 24,191	21,360	2,831	0

Client 1000

Family Care Foundation

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Statement 6
Form 990, Part III
Organization's Primary Exempt Purpose

The Foundation's purpose is to enhance the quality of life for all members of the community, especially the poor, suffering, or disadvantaged, and to provide knowledge and character building education to help strengthen families and children.

Statement 7
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
<p>Mission Support/Humanitarian services--In 1997, Family Care Foundation provided funding and administrative support for 20 distinct ministries, programs, and humanitarian projects in 9 countries. Primarily staffed by approximately 100 full-time volunteer missionaries, the individual projects under the Mission Support and Humanitarian Services Program serve a varied constituency and provide a wide range of services including: evangelization, Bible and Christian Education, services to youth at risk, educational and vocational services to the disabled, ministries to orphans, food distribution, and comfort and care for the sick and elderly.</p>	\$ 71,848	77,654
<p>Family Education Program- The Family Education Program aims to provide knowledge and character building education for youth and their families. To launch this program, in 1997 Family Care Foundation licensed worldwide distribution rights to three children's educational video series and as well as a stand alone documentary which focus on teaching important ethical and moral values. The fee-for-service broadcast and distribution of these videos at or below cost, are rich in family values and Christian principles, is a primary method of serving the clients of our Family Education Program. In 1997, following the acquisition of these rights, negotiations began for broadcast and distribution agreements in the</p>		

07/29/98

11:02 am

Statement 7 (Continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
United States and abroad, and plans are in place to distribute these directly to clients for free or below cost.	\$ 2,380	27,512
Personal Development Publishing--Family Care Foundation published 20,000 copies of two booklets which were distributed free of charge in 15 countries. One booklet is a unique thought-provoking and uplifting collection of anecdotes, reflections, literary quotations and verse that ponder what awaits us in the next life. The other booklet is a fascinating comparison of current events, statistics and facts, visa-vis Biblical prophecy. These booklets benefited a minimum of 40,000 individuals.		15,197
	\$ 74,228	120,363

Statement 8
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

Asset	Basis	Accumulated Depreciation	Book Value
Furniture and fixtures	\$ 7,386	1,234	6,152
Total	\$ 7,386	1,234	6,152

1997

Federal Statements

Page 7

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Family Care Foundation

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Statement 9
Form 990, Part IV, Line 58
Other Assets

	Ending
Donated Ambulance in Restoration	\$ 2,000
Total	<u>\$ 2,000</u>

Client 1000

Family Care Foundation

33-0734917

Statement 10 ^{1/5}
Form 990, Part II, Line 22
Schedule of Grants and Allocations

I. Cash Grants and Allocations:

Missionary Support for Missions Providing:
Services to Youth at Risk:

From the Heart
4804 Mission Street # 205
San Francisco, CA 94112\$ 24,180
Total\$ 24,180

Missionary Support for Missions Providing:
Services to Orphans:

Love's Bridge, Moscow
Proletarskii Prospect 21/220
Dom 134
Moscow, Russia\$ 2,670

Love's Bridge, Perm
614077 Box 5886
Perm, Russia\$ 1,000

Action in Focus
Box 63803
Nairobi, Kenya\$ 89
Total\$ 3,759

Missionary Support for Missions Conducting
Evangelization, Bible and Christian Studies:

Missionaries to Mexico
9051 - C Siempre Viva Road
Suite MX052-325
San Diego, CA 92173\$ 9,000

Tampa Family Missions
3225 S. Macdill #129-184
Tampa, FL 33629\$ 3,472

Burma Missionaries
Mr. Eric Gibson
53 Pyay Road

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Family Care Foundation

33-0734917

Statement 10 ^{3/5}
Form 990, Part II, Line 22
Schedule of Grants and Allocations

Myangone Township
Yangon
Myanmar\$ 1,000

Corazones Unidos
Pribyl 475
Admon 1, Ave. Madero 369
Morelia, Mich. 58000
Mexico\$ 5,040

Total\$ 18,512

Missionary Support for Missions Providing:
Services to The Handicapped:

Delhi Deaf Ministry
F-14 South Extension Part 1
U&I Building (2nd Floor)
New Delhi 110049
India\$ 3,000
Total\$ 3,000

Gifts to Other Non Profits:

Focus on the Family
Colorado Springs, CO 80995-7620\$ 100
Total\$ 100

Sponsorship of Children's Educational Videos

From the Heart
4804 Mission Street # 205
San Francisco, CA 94112\$ 2,380
Total\$ 2,380

Grand Total Cash Grants and Allocations:\$ 51,931

Statement 10 3/5
Form 990, Part II, Line 22
Schedule of Grants and Allocations

II. Non-Cash Grants and Allocations:

Fair Market Value of Food Assistance to Organizations:

Milk and Milk products, Assorted Produce, Meat, Canned Goods, Juices, Cheese, Bread, Tortilla Chips. All food was obtained by donation from vendors. Book value is equal to the fair market value, which was determined by reference to the usual retail cost normally charged by vendor.

Santa Ana Missions
3337 South Bristol Street #74
Santa Ana CA 92704\$ 900

La Nueva Jerusalem
Foursquare Church
423 North Puente Ave.
La Puente , CA 91746.....\$1,260

St. Matthias Church
7056 Washington Ave.
Whittier, CA 90602.....\$ 200

Total Food Assistance to Organizations\$ 2,360

Statement 10 ⁴/₅
Form 990, Part II, Line 22
Schedule of Grants and Allocations

Fair Market Value of Used Vehicles Donated:
Book value of the vehicles is equal to the fair market value, which was determined by reference to the Kelly Blue book.

Fair Market Value of Vehicles Donated to Missionary Programs:

1986 Ford Van, Class HH, model AM

From the Heart
4804 Mission Street # 205
San Francisco, CA 94112\$ 4,000

1986 Ford Van, Class HH, model JM
Rachele Brouwer
3245 S. White Road # 169
San Jose, CA 95148\$ 4,000

1974 Dodge Beaver Motorhome
Edward Smith
15934 Hesperian Blvd. # 222
San Lorenzo, CA 94580.....\$3,500

Total\$11,500

Fair Market Value of Vehicles Donated to Food Distribution Program:

1984 Ford Van, Class HQ, model AM

Meet The Need
1704 Old Canyon Drive
Hacienda Heights, CA 91745\$ 4,000

Total\$4,000

Fair Market Value of Vehicles Donated to Programs for Youth at Risk:

Statement 10 5/5
Form 990, Part II, Line 22
Schedule of Grants and Allocations

1984 Ford Van, Class FL, model AMBU

Send a Kid To Camp Foundation

P.O. Box 1832

Big Bear Lake, CA 92315.....\$ 4,000

Total\$ 4,000

Total value of vehicles donated\$ 19,500

Fair Market Value of Clothing Donated To Missionary Programs:
Shirts, pants, dresses, underwear, coats. All clothing was obtained by donation from vendors.
Book value of the clothing is equal to the fair market value, which was determined by
reference by reference to the usual retail cost normally charged by vendor.

Prima Kids

Viale Petraraca #8

Milano Marittima (RA)

Italy 48016\$ 437

Total\$ 437

Grand Total Non Cash Grants and Allocations\$ 22,297